

Help your patients avoid penalty charges

Pharmacies will soon receive new resources on how to 'Help your patients avoid penalty charges' from the NHS Business Services Authority (NHS BSA).

In 2017, over a million people received a penalty charge notice after claiming free prescriptions. With checks increasing, the NHS BSA has recently updated their guidance to help patients understand their entitlement to free NHS prescriptions and the consequences of making an incorrect claim.

Over the next few weeks all pharmacies will receive a copy of a new A3 poster and 10 copies of a booklet for patients. Copies of these new resources, along with a factsheet for dispensers titled 'Help your patients avoid penalty charges', can be downloaded from tinyurl.com/BSAfreeprescriptions (see under 'Resources for dispensers')

Pharmacy teams can help their customers to avoid receiving penalty charge notices by:

- Displaying the new resources somewhere visible;
- Encouraging patients to check their entitlement prior to making a claim/ completing the declaration on the prescription;
- Asking to see evidence of patients' entitlement and checking the expiry



date on any certificates presented. REMEMBER: If a patient can't provide proof, mark the 'Evidence not seen' box on the prescription;

- Informing the person claiming exemption from payment of NHS prescription charges (where evidence

is required but not provided) that NHS checks are routinely undertaken to verify their entitlement, as part of arrangements for preventing or detecting fraud or error. Patients who claim free prescriptions that they're not entitled to may have to pay a penalty charge of up to £100, as well as the original prescription charges;

- Advising patients who are unsure of their entitlement to pay for their prescription(s) and provide them with an FP57 receipt with information on how to claim a refund (within three months) if they can later confirm that they are entitled. Further information for patients can be found at www.nhs.uk/healthcosts; and
- Signposting patients currently paying for their prescriptions that they may benefit from buying a prescription prepayment certificate or applying for the NHS Low Income Scheme, where appropriate.

If you have any comments or would be interested in ordering additional supplies, please email: nhsbsa.communicationsteam@nhs.net

Can it be dispensed on an FP10?

When pharmacy teams receive NHS prescriptions, they must check whether the items prescribed are allowed on the NHS before dispensing otherwise the pharmacy contractor may not be paid for them. Below is a list of some products that we have recently received queries about.

| Product | Is the item listed in the Drug Tariff? | Is it in the blacklist?* | Does it have a 'CE' mark? | Can it be dispensed on an FP10? | Additional information |
|---|--|--------------------------|---------------------------|---------------------------------|--|
| Vizulize dry eye mist | No | n/a | Yes | No | This item is a medical device (CE marked) and is not listed in Part IX of the Drug Tariff. |
| Vizulize Hypromellose 0.3% eye drops | Yes | n/a | Yes | Yes | This item is a medical device (CE marked) and is listed in Part IX of the Drug Tariff. |
| Vizulize Intensive 0.3% eye drops | Yes | n/a | Yes | Yes | This item is a medical device (CE marked) and is listed in Part IX of the Drug Tariff. |
| Hyabak UD 0.15% eye drops 0.4ml unit dose | No | n/a | Yes | No | This item is a medical device (CE marked) and is not listed in Part IX of the Drug Tariff. |

*n/a is because medical devices are not listed in the blacklist.

Please note: If the prescription is an FP10CN or FP10PN (community nurse prescriber), an FP10D (dental prescriber) or an FP10MDA (instalment dispensing), please visit psnc.org.uk/prescriptionforms for more information.

Ask PSNC

The PSNC Dispensing and Supply Team can provide pharmacy teams with support and advice on a range of topics related to the Drug Tariff and reimbursement. Questions asked in recent months have included:

Q. Do I need to submit age exempt EPS tokens with my end of month bundle?

A. No, community pharmacy contractors should **not** submit age exempt Electronic Prescription Service (EPS) tokens with their end of month prescription bundles.

The tokens which should be sent to the Pricing Authority are those where:

- the exemption status has been captured (other than where the patient is age exempt, i.e. aged under 16 or over 59); or
- if the patient has paid a charge.

With exception for the NHS Urgent Medicine Supply Advanced Service (NUMSAS), **tokens are not used for payment**, reimbursement is made against electronically submitted EPS Release 2 claim messages and the exemption category applied to that message. Tokens are submitted for audit purposes only.

Contractors are not required to keep those tokens which do not need to be sent to the Pricing Authority. These can therefore be disposed of in accordance with the Data Protection Act and the pharmacy team's own processes.

For more information on submitting EPS tokens see psnc.org.uk/epstokensubmission

Q. If a prescription was dispensed before the 1st April but the patient didn't collect it until after the 1st April, should the patient pay the old or the new prescription charge?

A. There is no national guidance on this issue so pharmacy staff will be required to exercise their professional judgement. Whatever the decision, pharmacy staff are advised to record the charge made and the reasons for doing so on the patient's PMR record.

Please note that for EPS prescriptions any claim message received by the Pricing Authority 5th April 2018 or after will be charged at the new prescription charge rate irrespective of the date on which the dispense notification was sent.

Q. The prescriber has signed a prescription token; does this make it a legal NHS prescription?

A. No. With EPS R2, payment is always based on the electronic message. R2 tokens are designed to minimise the risk of confusion by over-writing the signature box to state that the token should not be used as a prescription.

Q. How many prescription charges should be levied if both carbamazepine 200mg tablets and carbamazepine MR 200mg tablets are prescribed on the same FP10 prescription?

A. Where different formulations or presentations of the same drug or preparation are prescribed and supplied, multiple prescription charges are payable (see Part XVI, Clause 11.2 of the Drug Tariff). In this example, as standard tablets and modified-release tablets are different formulations, two prescription charges would be payable unless the patient was entitled to exemption or remission from the charge.

Look out for more frequently asked questions next month...

If you would like more information on any of the topics covered, the team at PSNC will be happy to help (0203 1220 810 or e-mail info@psnc.org.uk).

Supply issues

Disruptions to the supply of Menadiol Diphosphate Tablets 10mg and Trimovate Cream mean that only unlicensed versions of these products are currently available. Pharmacy teams will therefore need to ensure prescriptions are annotated with 'Unlicensed Special' or 'Special Order'. Pharmacy teams are reminded to follow the non-Part VIII B special endorsement guidance and place prescriptions in the red separators for the end of month submission.

Full details about the supply issues affecting these products can be found here: ow.ly/OcMK30jcrSh (for Menadiol) and here: ow.ly/PJy930jcrVI (for Trimovate)

Drug Tariff Watch

The Preface lists additions, deletions and alterations to the Drug Tariff. Below is a quick summary of the changes due to take place from **1st May 2018**.

KEY:

- SC** Special container
- R** Item requiring reconstitution
- *** This pack only (others already available)

Part VIIIA additions

Category A:

- Imatinib 100mg tablets (60)

Category C:

- Acetylcysteine 2g/10ml solution for infusion ampoules (10) – *Martindale Pharmaceuticals Ltd*
- Adrenaline (base) 150micrograms/0.3ml (1 in 2,000) solution for injection pre-filled disposable devices **SC** (1) and (2) – *EpiPen Jr.*
- Bimatoprost 300micrograms/ml / Timolol 5mg/ml eye drops 0.4ml unit dose preservative free (30 (6x**SC**5)) – *Ganfort*
- Cefuroxime 125mg/5ml oral suspension **R** (70ml) – *Zinnat*
- Diltiazem 120mg modified-release capsules (28) – *Adizem-XL*
- Diltiazem 120mg modified-release capsules (56) – *Adizem-SR*
- Diltiazem 180mg modified-release capsules (28) – *Adizem-XL*
- Diltiazem 180mg modified-release capsules (56) – *Adizem-SR*
- Diphtheria / Tetanus / Poliomyelitis (inactivated) vaccine (adsorbed) suspension for injection 0.5ml pre-filled syringes **SC** (1) – *Revaxis*
- Enoxaparin sodium 300mg/3ml solution for injection vials **SC** (1) – *Clexane*
- Estradiol 500micrograms / Dydrogesterone 2.5mg tablets (84) – *Femoston-conti*
- Glucose powder for oral use BP 1980 (500g) – *Thornton & Ross Ltd*
- Hepatitis A (inactivated) / Hepatitis B (rDNA) vaccine (adsorbed) suspension for injection 1ml pre-filled syringes **SC** (1) – *Ambirix*
- Insulin degludec 100units/ml / Liraglutide 3.6mg/ml solution for injection 3ml pre-filled disposable devices (3) – *Xultophy*
- Insulin lispro biphasic 50/50 100units/ml suspension for injection 3ml cartridges (5) – *Humalog Mix50*
- Insulin soluble human 100units/ml solution for injection 3ml cartridges (5) – *Humulin S*
- Methotrexate 12.5mg/0.5ml solution for injection pre-filled syringes **SC** (1) – *Zlatal*
- Methotrexate 15mg/0.6ml solution for injection pre-filled syringes **SC** (1) – *Zlatal*
- Methotrexate 17.5mg/0.7ml solution for injection pre-filled syringes **SC** (1) – *Zlatal*
- Methotrexate 20mg/0.8ml solution for injection pre-filled syringes **SC** (1) – *Zlatal*
- Methotrexate 22.5mg/0.9ml solution for injection pre-filled syringes **SC** (1) – *Zlatal*
- Methotrexate 25mg/1ml solution for injection pre-filled syringes **SC** (1) – *Zlatal*
- Methotrexate 7.5mg/0.3ml solution for injection pre-filled syringes **SC** (1) – *Zlatal*
- Nifedipine 20mg modified-release tablets (28) – *Adalat LA*

- Nifedipine 20mg modified-release tablets (56) – *Adalat retard*
- Somatropin (rbe) 10mg powder and solvent for solution for injection vials **SC** (1) – *Zomacton*
- Somatropin (rbe) 4mg powder and solvent for solution for injection vials **SC** (1) – *Zomacton*
- Somatropin (rmc) 8mg powder and solvent for solution for injection vials **SC** (1) – *Saizen*
- Timolol 2.5mg/ml eye drops preservative free **SC** (5ml) – *Eysano*
- Timolol 5mg/ml eye drops preservative free **SC** (5ml) – *Eysano*
- Ulipristal 5mg tablets (28) – *Esmya*

Part VIIIA amendments

- Imatinib 400mg tablets (30) – *Glivec* is changing to Category A
- Pramipexole 1.05mg modified-release tablets (30) – *Mirapexin* is changing to Category A
- Pramipexole 1.57mg modified-release tablets (30) – *Mirapexin* is changing to Category A
- Pramipexole 260microgram modified-release tablets (30) – *Mirapexin* is changing to Category A
- Pramipexole 2.1mg modified-release tablets (30) – *Mirapexin* is changing to Category A
- Pramipexole 2.62mg modified-release tablets (30) – *Mirapexin* is changing to Category A
- Pramipexole 3.15mg modified-release tablets (30) – *Mirapexin* is changing to Category A
- Pramipexole 520microgram modified-release tablets (30) – *Mirapexin* is changing to Category A

Part VIIIA deletions

- Emulsifying ointment 50% / Liquid paraffin 50% ointment (100g) – *Emulfin*

Part IX deletions

It is important to take careful note of removals from Part IX because if you dispense a deleted product, prescriptions will be returned as disallowed.

| Product | Type, Size, Product code |
|--|---|
| WOUND MANAGEMENT DRESSINGS - Tielle Xtra | Square (11cm x 11cm and 15cm x 15cm) and Rectangular (15cm x 20cm) |
| URINAL SYSTEMS - Bard Ltd - Maguire adaptor & tubing | 600532 |
| BELTS - AMI Medical Ltd - Corsinel Suportx Abdominal Tube, White | X Small (74-82cm) - CRL243W Small (78-90cm) - CRL244W Medium (86-98cm) - CRL245W Large (94-106cm) - CRL246W X Large (102-116cm) - CRL247W |